

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER			
FORMALITY REVIEW	TN	830	6/29/10
RESPONSE FORMALITY REVIEW	JK	835	6/29/10

INDEX OF CLAIMS

✓ Rejected  
 o Allowed  
 - (Through normal) Canceled  
 + Restricted  
 H Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Date	Claim	Date	Claim	Date
1	6-29-10	51		101	
2	6-29-10	52		102	
3	6-29-10	53		103	
4	6-29-10	54		104	
5	6-29-10	55		105	
6	6-29-10	56		106	
7	6-29-10	57		107	
8	6-29-10	58		108	
9	6-29-10	59		109	
10	6-29-10	60		110	
11	6-29-10	61		111	
12	6-29-10	62		112	
13	6-29-10	63		113	
14	6-29-10	64		114	
15	6-29-10	65		115	
16	6-29-10	66		116	
17	6-29-10	67		117	
18	6-29-10	68		118	
19	6-29-10	69		119	
20	6-29-10	70		120	
21	6-29-10	71		121	
22	6-29-10	72		122	
23	6-29-10	73		123	
24	6-29-10	74		124	
25	6-29-10	75		125	
26	6-29-10	76		126	
27	6-29-10	77		127	
28	6-29-10	78		128	
29	6-29-10	79		129	
30	6-29-10	80		130	
31	6-29-10	81		131	
32	6-29-10	82		132	
33	6-29-10	83		133	
34	6-29-10	84		134	
35	6-29-10	85		135	
36	6-29-10	86		136	
37	6-29-10	87		137	
38	6-29-10	88		138	
39	6-29-10	89		139	
40	6-29-10	90		140	
41	6-29-10	91		141	
42	6-29-10	92		142	
43	6-29-10	93		143	
44	6-29-10	94		144	
45	6-29-10	95		145	
46	6-29-10	96		146	
47	6-29-10	97		147	
48	6-29-10	98		148	
49	6-29-10	99		149	
50	6-29-10	100		150	

If more than 150 claims or 10 actions  
staple additional sheet here

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